BK 04 13 PG 0436

FILE #02-029
PREPARED BY & RETURN TO:
MCFALL LAW FIRM
7105 SWINNEA RD SUITE 1
SOUTHAVEN, MS 38671
(662) 349-7780

DEBORAH A. VERUCCHI AND HUSBAND, CHARLES M. VERUCCHI AND DAVID LLOYD PARKER, GRANTORS

TO

WARRANTY DEED

JIMMY R. HEILMAN AND WIFE, DEANNA L. HEILMAN, GRANTEES

FOR AND IN CONSIDERATION of Ten Dollars (\$10.00), cash in hand paid, and for other good and valuable considerations, the receipt and sufficiency of all of which is hereby acknowledged, **DEBORAH A. VERUCCHI, AND HUSBAND, CHARLES M. VERUCCHI AND DAVID LLOYD PARKER,** does hereby sell, convey, and warrant unto **JIMMY R. HEILMAN AND WIFE, DEANNA L. HEILMAN,** as tenants by the entirety with full rights of survivorship, the following described property situated in the County of DeSoto, State of Mississippi, together with all improvements and appurtenances thereon more particularly described as follows:

Lot 1203, Section F, Greenbrook Subdivision, in Section 19, Township 1 South, Range 7 West, in DeSoto County, Mississippi, as shown on plat appearing of record in Plat Book 9, Pages 46-49, in the office of the Chancery Clerk of DeSoto County, Mississippi.

The warranty in this deed is subject to subdivision restrictions, building lines and easements, any covenants of record; rights of ways and easements for public roads and public utilities, to building, zoning, subdivision and heath department regulations in effect for DeSoto County, Mississippi.

Taxes for the year 2002 have been prorated between the Grantors and Grantees and shall be paid on due date by Grantees.

BY WAY OF FURTHER EXPLANATION: Lloyd Parker and Wife, Dorothy L. Parker, held title as tenants by the entirety with full rights of survivorship in Warranty Deed recorded in Book 144, Page 9. Dorothy L. Parker departed this life on January 30, 1996. David L. Parker as conservator of Lloyd Parker who departed this life on August 31, 1997, incorrectly quitclaimed said property to David L. Parker and Deborah Ann Verucchi following the death of Lloyd Parker deed recorded in Book 315, Page 559. David L. Parker incorrectly quitclaimed his interest in said property to Deborah A. Verucchi and Husband, Charles M. Verucchi said deed recorded in Book 330, Page 64. David L. Parker and Deborah A. Verucchi are now executing this deed by way of the only surviving heirs of Lloyd Archibald Parker, Jr. Heirship Affidavits and death certificates are attached hereto. Charles M. Verucchi is joining in the execution of this deed by way of his marriage to Deborah A. Verucchi.

WITNESS OUR SIGNATURE, this the 28th day of February, 2002.

STATE MS .- DESOTO CO.

DERORAH A VERUCCHI

Mar 7 3 10 PM *02

Thirles M. Verneau Spouse of HEIR

W.E. DAVIS OH. OLK.

DAVID LLOVD PÅRKER

STATE OF MISSISSIPPI; COUNTY OF DESOTO;

PERSONALLY APPEARED before me, the undersigned authority at law, in and for the State and County aforesaid, within named: DEBORAH A. VERUCCHI AND HUSBAND, CHARLES M. WERUCCHI AND DAVID LLOYD PARKER, who acknowledged that they signed and delivered the above and foregoing Deed on the day and year therein mentioned, as their free act and deed, and for the purposes that on expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, THIS THE 28th DAY OF FEBRUARY OF

History Public State of Mississippi At Large My Commission Expires: August 23, 2003 Eonded Thru Heiden, Brooks & Garland, Inc.

NOTARY PUBLIC

My Commission Expires:

Property Address: 8512 Deepwell Place, Southaven, Mississippi 38671

GRANTOR'S ADDRESS

GRANTEE'S ADDRESS

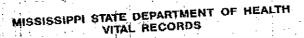
1310 TERI LYNN COURT KINGSTON SPRINGS TN 37082

8512 Decovell Place

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F.E. Thompson, Jr., M.D., M.P.H. STATE HEALTH OFFICER

Nita Cox Gunter FEB 29 96 STATE REGISTRAR
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MISSISSIPPI STATE DEPARTMENT OF HEALTH



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WARNING:

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HEIRSHIP AFFIDAVIT

(Heirship of Llayd Arch hald Parker, 5r. Deceased)

•
STATE OF MISSISSIPPI
Harvey E. Gideon, of lawful age,
being first duly sworn, upon his oath deposes and says:
That he was personally well acquainted with the above decedent, during his lifetime, having known him for
years, and that affiant bears the following relationship to the said decedent, towit:
street from Nim tor of deals. Fletch
Affiant further states that the said decedent departed this life at 8:00 Am, in Lafauette County,
State of Mississipi , on or about August 3) , 197 , being / 8 years old at
the date of his death.
Affiant further states that he was well acquainted with the family and near relatives of the said decedent, and with all
those who would under the laws of the State of MISSISS, OPI, be his heirs, and that the following statements
and the answers to the following named questions are based upon the personal knowledge of affiant and are true and correct:
QUESTION 1 - Did the decedent leave a will? ANSWER: ON 14 KINDO
QUESTION 2 - If so, has the will been admitted to probate - at what place, and when? ANSWER:
don't know- not to my know teage
QUESTION 3 - Has an administrator been appointed for the estate of said deceased? ANSWER: 1 1 17
QUESTION 4 - If so, give the County in which the said administration proceedings are pending, and the name and address
of the administrator, ANSWER:
QUESTION 5 - Did the decedent receive the benefit of any Medicaid payments? ANSWER: YesNo
If yes, attach copy of Division of Medicaid Waiver of Recovery pursuant to Section 43-13-317.
QUESTION 6 - Give the name and address of the surviving widow or widower of decedent. ANSWER:
i not living, state date of death sych size and and an analysis and an analysi
QUESTION 7 - If the decedent was married more than once, give the name of the former husband or wife, and state whether
said former spouse is dead or divorced.
ANSWER: 110+ +6 M 11 1000 of residence of all surviving children of deceased.
QUESTION 8 - On the blank lines below, give the names and places of residence of all surviving children of deceased, together with the other information called for: ANSWER: (Give names of surviving children only)
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2 Deborah Parker Living Intendet vertical Thingsion = Pin
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4. <u>NA</u>
QUESTION 9 - Give below the names of any deceased children of the decedent, together with the other information called
for: ANSWER:
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QUESTION 10 - Give	the names of the chil	dren of any decea	ased son or daugh	iter of the decedent:	ANSWER:	
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QUESTION 12 - Die	d the decedent leav	e any unpaid de	bts; and if so, gi	ve as nearly as po	ssible, the amoun	of such debts,
and	d whether they have	since been paid	1/	. No-1- 0	110 110	101-x
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and sisters of the dec	edent, together with t	he other informati	on called for:	ANSWER:		IF NOT LIVING
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				A 21.4.	D ()	
My commission exp	oires:			CI YOU	1 2. COL	
Kctary Public State	of Mississippi At Large			Notary Public	in the season of the	September 1
	, Brooks & Garland, Inc.				A.	
		CORROE	ORATION AFF	IDAVIT		
			signed by some	person other than th	e one making the fo	regoing affidavit.)
COUNTY OF					1 Same	
						, of lawful
age, being first duly	y sworn, upon his o	ath states: That	the information			
				is true, to the p	ersonal knowledge	e of this affiant.
3				Signature of C	orroborating Affian	t
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Subscribed	d and sworn to befo	re me this	day +	of		
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My communication ex	pires:	g.		· · · · · · · · · · · · · · · · · · ·		
<u> </u>				Notary Public		

NOTE: If any of heirs of decedent have died since his death, secure separate proof of heirship as to each.

MISSISSIPPI VALLEY TITLE

* * * * * * * * * OLD REPUBLIC

* National Title Insurance Company

MVT 92-16

HEIRSHIP AFFIDAVIT

(Heirship of Lloyd Archibaldarker, 5r. Deceased)

(Heirship of LTOCATA CARACTER Decoused)
Mississippi
STATE OF TRIBLES TO THE STATE
COUNTY OF B. GIDEON, of lawful age,
being first duly sworn, upon his oath deposes and says:
That he was personally well acquainted with the above decedent, during his lifetime, having known him for
years, and that affiant bears the following relationship to the said decedent, towit: 1000 acros of the said decedent acros o
Affiant further states that the said decedent departed this life at 8:00 Am, in LA fayette County, State of Mississippi , on or about August 31 , 19 97 , being 78 years old at
the date of his death.
Affiant further states that he was well acquainted with the family and near relatives of the said decedent, and with all
those who would under the laws of the State of MISSISSIPPT, be his heirs, and that the following statements
and the answers to the following named questions are based upon the personal knowledge of affiant and are true and correct: QUESTION 1 - Did the decedent leave a will? ANSWER: Probably 1eff everything to the control of the control
QUESTION 2 - If so, has the will been admitted to probate - at what place, and when? ANSWER:
Idont-think SD.
QUESTION 3 - Has an administrator been appointed for the estate of said deceased? ANSWER:
QUESTION 4 - If so, give the County in which the said administration proceedings are pending, and the name and address
of the administrator. ANSWER:
QUESTION 5 - Did the decedent receive the benefit of any Medicaid payments? ANSWER: Yes No
If yes, attach copy of Division of Medicaid Waiver of Recovery pursuant to Section 43-13-317.
QUESTION 6 - Give the name and address of the surviving widow or widower of decedent. ANSWER: Con Double Parker - Druk Branch daughter kingston Spring
2771.1200.
wife If not living, state date of death Dorothy died 1-3096.
QUESTION 7 - If the decedent was married more than once, give the name of the former husband or wife, and state whether
said former spouse is dead or divorced. ANSWER: DON'T DELIVE SO:
QUESTION 8 - On the blank lines below, give the names and places of residence of all surviving children of deceased,
together with the other information called for: ANSWER: (Give names of surviving children only)
ADDRESS OR IF NOT LIVING NAME OF IF NOT LIVING DATE OF BIRTH DATE OF BEATH NAME OF CHILD NAME
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2 Debrah toung mig migae:
3. <u>N/A</u>
4. N/A
QUESTION 9 - Give below the names of any deceased children of the decedent, together with the other information called
for; ANSWER:
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JESTION 10 - Give the names		ADDRESS OR	
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JESTION 11 - Did the dece	dent have any adopted o	children, or step-children taken in	ito his home?
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	they have since been pa		
ANSWER:		ly Knowledge	L. He was always proud
	•	give below the names and addre	sses (together with other information
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		en of a deceased child, then give be ation called for: ANSWER:	low the names of any deceased brothers
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NOTE: If any of heirs of decedent have died since his death, secure separate proof of heirship as to each.



HEIRSHIP AFFIDAVIT

(Heirship of Uoyd Archibald Parkor, Jr. Deceased)

(Heirship of City Trace	
STATE OF MISSISSIPPI	
COUNTY OF DESOTO	
Rosemary G. Beckett, of lawful age,	
being first duly sworn, upon his oath deposes and says:	
That he was personally well acquainted with the above decedent, during his lifetime, having known him for	
years, and that affiant bears the following relationship to the said decedent, towit: Knew through family member later became "Maughters to ther in Law.	<u> </u>
ASSESS States at states that the said decedent departed this life at 8:00 Am in LA fauette county.	,
Affiant further states that the said decedent departed this life at 8:00Am, in LA fayette county, State of MISSISSIPPI, on or about AvguSt 31, 19 97, being 98 years old at	
the date of his death.	
Affiant further states that he was well acquainted with the family and near relatives of the said decedent, and with all	_
those who would under the laws of the State of Atsissippi , be his heirs, and that the following statements	. :
and the answers to the following named questions are based upon the personal knowledge of affiant and are true and correct:	
QUESTION 1 - Did the decedent leave a will? ANSWER: UNKNOWN	
QUESTION 2 - If so, has the will been admitted to probate - at what place, and when? ANSWER:	
not as far as I know	
QUESTION 3 - Has an administrator been appointed for the estate of said deceased? ANSWER:	
QUESTION 4 - If so, give the County in which the said administration proceedings are pending, and the name and address	
of the administrator. ANSWER:	
QUESTION 5 - Did the decedent receive the benefit of any Medicaid payments? ANSWER: Yes No	
** The street convert Division of Modicaid Waiver of Recovery pursuant to Section 43-13-317.	-1 -104
QUESTION 6 - Give the name and address of the surviving widow or widower of decedent. ANSWER: Dythothydic	דו יספ
Smith talker - DIDD FACE, OHR DAIR DEWEITER IN GOICHOP	INSS)
If not living, state date of death Dorothy L. Parker 1-30-1997	
QUESTION 7 - If the decedent was married more than once, give the name of the former husband or wife, and state whether	
said former spouse is dead or divorced.	
ANSWER:	
QUESTION 8 - On the blank lines below, give the names and places of residence of all surviving children of deceased,	
together with the other information called for: ANSWER: (Give names of surviving children only)	
ADDRESS OR IF NOT LIVING NAME OF IF NOT LIVING	
NAME OF CHILD DAKE OF BIRTH DATE OF DEATH HUSBAND OR WIFE PARE OF DEATH	بو
tonomb Priker - Living Michael Veruschi Kingston Sprin	MS.]
2. Deborantana song minutes	. رحن
3. 0114	-
4. NA	 러
QUESTION 9 - Give below the names of any deceased children of the decedent, together with the other information called	J
for: ANSWER: SURVIVING IF NOT LIVING	
NAME OF CHILD DATE OF BIRTH DATE OF DEATH HUSBAND OR WIFE DATE OF DEATH	
1.	
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	Bive the names of the c	• .•	· ·			
	NAME OF CHILD	DATE OF BIRTH	ADDRESS OR IF NOT LIVING, DATE OF		NAME OF FATHER AND	MOTHER
	- A 1 - N		,			
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	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 					
OTION 44	- Did the decedent ha	ave any adopted c	hildren, or step-chi	ldren taken into his	home?	
SHONTI	ANSWER: Yes	NoX_	IF SO, WRITE T	HEIR NAMES, AG	EŞ, AND ADDREŞ	SES IN THE
	7,110112.0	•	BLANK LINES	BELOW:		
	NAME	AGE		ADDRESS		
<u> </u>					<u></u>	
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ESTION 12	- Did the decedent l	eave any unpaid c	lebts; and if so, giv	e as nearly as pos	sible, the amount	of such debts
	and whether they h	ave since been pa		14.	-	
	ANSWER: 100	ne that	+ T VINC	<u> </u>	ما على ما داد من من ما داد من	er informatio
ESTION 13	- If the decedent left	no children, then	give below the nan	nes and addresses	b. Grođerner miru oru	ет ппоннацо :
	called for), of his si	urviving father, mo	other, brothers and	ADDRI	ESS OR IF NOT LIVING	
	NAME	RELATIO	ISHIP AGE	,	DATE OF DEATH	
· 		,				· · · · · · · · · · · · · · · · · · ·
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d sisters of t	- If the deceased left n he decedent, together v	With the other inform	nation called for:	ANSWER: _ SURVIVING CHILDREN	· .	IF NOT LIVING DATE OF DEATH
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	NA 701100	<u> </u>				
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/ly commiss	sion expires:	i At large	day day	Circly	7. Whi	
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